BEFORE THE MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

In the Matter of the Accusation)	
Against:)	
)	
)	
Margaret L. Salmon, M.D.) Case No. 800-2018-04368	37
)	
Physician's and Surgeon's)	
Certificate No. A 112137) '	
)	
Respondent)	
)	

DECISION

The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on August 23, 2019.

IT IS SO ORDERED: July 26, 2019.

MEDICAL BOARD OF CALIFORNIA

Kristina D. Lawson, J.D., Chair

Panel B

- 1		·		
1	XAVIER BECERRA			
.2	Attorney General of California MARY CAIN-SIMON			
3	Supervising Deputy Attorney General GREG W. CHAMBERS			
4	Deputy Attorney General State Bar No. 237509			
5	455 Golden Gate Avenue, Suite 11000 San Francisco, CA 94102-7004	•		
6	Telephone: (415) 510-3382 Facsimile: (415) 703-5480			
7	Attorneys for Complainant			
8	BEFOR	E THE		
9	MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS			
10	STATE OF CALIFORNIA			
11	·			
12		Case No. 800-2018-043687		
13	In the Matter of the Accusation Against:			
14	MARGARET L. SALMON, M.D.	STIPULATED SETTLEMENT AND DISCIPLINARY ORDER		
15	2753 23rd Street San Francisco, CA 94110-3443	DISCH ENVIRON ORDER		
16	Physician's and Surgeon's Certificate No. A 112137			
17	Respondent.			
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20	In the interest of a prompt and speedy settle	ment of this matter, consistent with the public		
21	interest and the responsibility of the Medical Boar	ed of California of the Department of Consumer		
22	Affairs, the parties hereby agree to the following Stipulated Settlement and Disciplinary Order			
23	which will be submitted to the Board for approval	and adoption as the final disposition of the		
24	Accusation.			
25	PART	TIES		
26	1. Kimberly Kirchmeyer (Complainant)	is the Executive Director of the Medical Board		
27	of California (Board). She brought this action sol	ely in her official capacity and is represented in		
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this matter by Xavier Becerra, Attorney General of the State of California, by Greg W. Chambers, Deputy Attorney General.

- 2. Respondent Margaret L. Salmon, M.D. (Respondent) is represented in this proceeding by attorney Adam G. Slote, One Embarcadero Center, Suite 400, San Francisco, CA 94111.
- 3. On or about April 28, 2010, the Board issued Physician's and Surgeon's Certificate No. A 112137 to Margaret L. Salmon, M.D. (Respondent). The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in Accusation No. 800-2018-043687, and will expire on September 30, 2019, unless renewed.

JURISDICTION

- 4. Accusation No. 800-2018-043687 was filed before the Board, and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on May 29, 2019. Respondent timely filed her Notice of Defense contesting the Accusation.
- 5. A copy of Accusation No. 800-2018-043687 is attached as exhibit A and incorporated herein by reference.

ADVISEMENT AND WAIVERS

- 6. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 800-2018-043687. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.
- 7. Respondent is fully aware of her legal rights in this matter, including the right to a hearing on the charges and allegations in the Accusation; the right to confront and cross-examine the witnesses against her; the right to present evidence and to testify on her own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.
- 8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

CULPABILITY

- 9. Respondent understands and agrees that the charges and allegations in Accusation No. 800-2018-043687, if proven at a hearing, constitute cause for imposing discipline upon her Physician's and Surgeon's Certificate.
- 10. For the purpose of resolving the Accusation without the expense and uncertainty of further proceedings, Respondent agrees that, at a hearing, Complainant could establish a factual basis for the charges in the Accusation, and that Respondent hereby gives up her right to contest those charges.
- 11. Respondent agrees the Disciplinary Order below, requiring the disclosure of probation pursuant to Business and Professions Code section 2228.1, serves to protect the public interest.
- 12. Respondent agrees that her Physician's and Surgeon's Certificate is subject to discipline and she agrees to be bound by the Board's probationary terms as set forth in the Disciplinary Order below.

CONTINGENCY

- 13. This stipulation shall be subject to approval by the Medical Board of California. Respondent understands and agrees that counsel for Complainant and the staff of the Medical Board of California may communicate directly with the Board regarding this stipulation and settlement, without notice to or participation by Respondent or her counsel. By signing the stipulation, Respondent understands and agrees that she may not withdraw her agreement or seek to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal action between the parties, and the Board shall not be disqualified from further action by having considered this matter.
- 14. The parties understand and agree that Portable Document Format (PDF) and facsimile copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile signatures thereto, shall have the same force and effect as the originals.

15. In consideration of the foregoing admissions and stipulations, the parties agree that the Board may, without further notice or formal proceeding, issue and enter the following Disciplinary Order:

DISCIPLINARY ORDER

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 112137 issued to Respondent Margaret L. Salmon, M.D. is revoked. However, the revocation is stayed and Respondent is placed on probation for four (4) years on the following terms and conditions.

1. <u>CONTROLLED SUBSTANCES - ABSTAIN FROM USE</u>. Respondent shall abstain completely from the personal use or possession of controlled substances as defined in the California Uniform Controlled Substances Act, dangerous drugs as defined by Business and Professions Code section 4022, and any drugs requiring a prescription. This prohibition does not apply to medications lawfully prescribed to Respondent by another practitioner for a bona fide illness or condition.

Within fifteen (15) calendar days of receiving any lawfully prescribed medications, Respondent shall notify the Board or its designee of the: issuing practitioner's name, address, and telephone number; medication name, strength, and quantity; and issuing pharmacy name, address, and telephone number.

- 2. <u>ALCOHOL ABSTAIN FROM USE</u>. Respondent shall abstain completely from the use of products or beverages containing alcohol.
- 3. PROFESSIONALISM PROGRAM (ETHICS COURSE). Within sixty (60) calendar days of the effective date of this Decision, Respondent shall enroll in a professionalism program that meets the requirements of Title 16, California Code of Regulations (CCR) section 1358.1. Respondent shall participate in and successfully complete that program. Respondent shall provide any information and documents that the program may deem pertinent. Respondent shall successfully complete the classroom component of the program not later than six (6) months after Respondent's initial enrollment, and the longitudinal component of the program not later than the time specified by the program, but no later than one (1) year after attending the classroom component. The professionalism program shall be at Respondent's expense and shall be in

addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

A professionalism program taken after the acts that gave rise to the charges in the Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board or its designee, be accepted towards the fulfillment of this condition if the program would have been approved by the Board or its designee had the program been taken after the effective date of this Decision.

Respondent shall submit a certification of successful completion to the Board or its designee not later than fifteen (15) calendar days after successfully completing the program or not later than fifteen (15) calendar days after the effective date of the Decision, whichever is later.

4. <u>PSYCHOTHERAPY</u>. Within sixty (60) calendar days of the effective date of this Decision, Respondent shall submit to the Board or its designee for prior approval the name and qualifications of a California-licensed board certified psychiatrist or a licensed psychologist who has a doctoral degree in psychology and at least five years of postgraduate experience in the diagnosis and treatment of emotional and mental disorders. Upon approval, Respondent shall undergo and continue psychotherapy treatment, including any modifications to the frequency of psychotherapy, until the Board or its designee deems that no further psychotherapy is necessary.

The psychotherapist shall consider any information provided by the Board or its designee and any other information the psychotherapist deems relevant and shall furnish a written evaluation report to the Board or its designee. Respondent shall cooperate in providing the psychotherapist with any information and documents that the psychotherapist may deem pertinent.

Respondent shall have the treating psychotherapist submit quarterly status reports to the Board or its designee. The Board or its designee may require Respondent to undergo psychiatric evaluations by a Board-appointed board certified psychiatrist. If, prior to the completion of probation, Respondent is found to be mentally unfit to resume the practice of medicine without restrictions, the Board shall retain continuing jurisdiction over Respondent's license and the period of probation shall be extended until the Board determines that Respondent is mentally fit to resume the practice of medicine without restrictions.

Respondent shall pay the cost of all psychotherapy and psychiatric evaluations.

5. <u>SOLO PRACTICE PROHIBITION</u>. Respondent is prohibited from engaging in the solo practice of medicine. Prohibited solo practice includes, but is not limited to, a practice where: 1) Respondent merely shares office space with another physician but is not affiliated for purposes of providing patient care, or 2) Respondent is the sole physician practitioner at that location.

If Respondent fails to establish a practice with another physician or secure employment in an appropriate practice setting within sixty (60) calendar days of the effective date of this Decision, Respondent shall receive a notification from the Board or its designee to cease the practice of medicine within three (3) calendar days after being so notified. The Respondent shall not resume practice until an appropriate practice setting is established.

If, during the course of the probation, the Respondent's practice setting changes and the Respondent is no longer practicing in a setting in compliance with this Decision, the Respondent shall notify the Board or its designee within five (5) calendar days of the practice setting change. If Respondent fails to establish a practice with another physician or secure employment in an appropriate practice setting within sixty (60) calendar days of the practice setting change, Respondent shall receive a notification from the Board or its designee to cease the practice of medicine within three (3) calendar days after being so notified. The Respondent shall not resume practice until an appropriate practice setting is established.

- 6. <u>LIMITATION OF PRACTICE</u>. During probation, Respondent is prohibited from practicing medicine during overnight shifts.
- 7. NOTICE OF EMPLOYER OR SUPERVISOR INFORMATION. Within seven (7) days of the effective date of this Decision, Respondent shall provide to the Board the names, physical addresses, mailing addresses, and telephone numbers of any and all employers and supervisors. Respondent shall also provide specific, written consent for the Board, Respondent's worksite monitor, and Respondent's employers and supervisors to communicate regarding Respondent's work status, performance, and monitoring.

For purposes of this section, "supervisors" shall include the Chief of Staff and Health or

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27 28 Well Being Committee Chair, or equivalent, if applicable, when the Respondent has medical staff privileges.

8. BIOLOGICAL FLUID TESTING. Respondent shall immediately submit to biological fluid testing, at Respondent's expense, upon request of the Board or its designee. "Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair follicle testing, or similar drug screening approved by the Board or its designee. Respondent shall make daily contact with the Board or its designee to determine whether biological fluid testing is required. Respondent shall be tested on the date of the notification as directed by the Board or its designee. The Board may order a Respondent to undergo a biological fluid test on any day, at any time, including weekends and holidays. Except when testing on a specific date as ordered by the Board or its designee, the scheduling of biological fluid testing shall be done on a random basis. The cost of biological fluid testing shall be borne by the Respondent.

During the first year of probation, Respondent shall be subject to 52 to 104 random tests. During the second year of probation and for the duration of the probationary term, up to five (5) years, Respondent shall be subject to 36 to 104 random tests per year. Only if there has been no positive biological fluid tests in the previous five (5) consecutive years of probation, may testing be reduced to one (1) time per month. Nothing precludes the Board from increasing the number of random tests to the first-year level of frequency for any reason.

Prior to practicing medicine, Respondent shall contract with a laboratory or service, approved in advance by the Board or its designee, that will conduct random, unannounced, observed, biological fluid testing and meets all of the following standards:

- (a) Its specimen collectors are either certified by the Drug and Alcohol Testing Industry Association or have completed the training required to serve as a collector for the United States Department of Transportation.
- (b) Its specimen collectors conform to the current United States Department of Transportation Specimen Collection Guidelines.
- (c) Its testing locations comply with the Urine Specimen Collection Guidelines published by the United States Department of Transportation without regard to the type of test

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administered.

- (d) Its specimen collectors observe the collection of testing specimens.
- (e) Its laboratories are certified and accredited by the United States Department of Health and Human Services.
- (f) Its testing locations shall submit a specimen to a laboratory within one (1) business day of receipt and all specimens collected shall be handled pursuant to chain of custody procedures. The laboratory shall process and analyze the specimens and provide legally defensible test results to the Board within seven (7) business days of receipt of the specimen. The Board will be notified of non-negative results within one (1) business day and will be notified of negative test results within seven (7) business days.
- (g) Its testing locations possess all the materials, equipment, and technical expertise necessary in order to test Respondent on any day of the week.
- (h) Its testing locations are able to scientifically test for urine, blood, and hair specimens for the detection of alcohol and illegal and controlled substances.
- (i) It maintains testing sites located throughout California.
- (i) It maintains an automated 24-hour toll-free telephone system and/or a secure on-line computer database that allows the Respondent to check in daily for testing.
- (k) It maintains a secure, HIPAA-compliant website or computer system that allows staff access to drug test results and compliance reporting information that is available 24 hours a day.
- (1) It employs or contracts with toxicologists that are licensed physicians and have knowledge of substance abuse disorders and the appropriate medical training to interpret and evaluate laboratory biological fluid test results, medical histories, and any other information relevant to biomedical information.
- (m) It will not consider a toxicology screen to be negative if a positive result is obtained while practicing, even if the Respondent holds a valid prescription for the substance.

Prior to changing testing locations for any reason, including during vacation or other travel, alternative testing locations must be approved by the Board and meet the requirements above.

The contract shall require that the laboratory directly notify the Board or its designee of non-negative results within one (1) business day and negative test results within seven (7) business days of the results becoming available. Respondent shall maintain this laboratory or service contract during the period of probation.

A certified copy of any laboratory test result may be received in evidence in any proceedings between the Board and Respondent.

If a biological fluid test result indicates Respondent has used, consumed, ingested, or administered to himself or herself a prohibited substance, the Board shall order Respondent to cease practice and instruct Respondent to leave any place of work where Respondent is practicing medicine or providing medical services. The Board shall immediately notify all of Respondent's employers, supervisors and work monitors, if any, that Respondent may not practice medicine or provide medical services while the cease-practice order is in effect.

A biological fluid test will not be considered negative if a positive result is obtained while practicing, even if the practitioner holds a valid prescription for the substance. If no prohibited substance use exists, the Board shall lift the cease-practice order within one (1) business day.

After the issuance of a cease-practice order, the Board shall determine whether the positive biological fluid test is in fact evidence of prohibited substance use by consulting with the specimen collector and the laboratory, communicating with the licensee, his or her treating physician(s), other health care provider, or group facilitator, as applicable.

For purposes of this condition, the terms "biological fluid testing" and "testing" mean the acquisition and chemical analysis of a Respondent's urine, blood, breath, or hair.

For purposes of this condition, the term "prohibited substance" means an illegal drug, a lawful drug not prescribed or ordered by an appropriately licensed health care provider for use by Respondent and approved by the Board, alcohol, or any other substance the Respondent has been instructed by the Board not to use, consume, ingest, or administer to himself or herself.

If the Board confirms that a positive biological fluid test is evidence of use of a prohibited substance, Respondent has committed a major violation, as defined in section 1361.52(a), and the Board shall impose any or all of the consequences set forth in section 1361.52(b), in addition to

any other terms or conditions the Board determines are necessary for public protection or to enhance Respondent's rehabilitation.

9. WORKSITE MONITOR FOR SUBSTANCE-ABUSING LICENSEE. Within thirty (30) calendar days of the effective date of this Decision, Respondent shall submit to the Board or its designee for prior approval as a worksite monitor, the name and qualifications of one or more licensed physician and surgeon, other licensed health care professional if no physician and surgeon is available, or, as approved by the Board or its designee, a person in a position of authority who is capable of monitoring the Respondent at work.

The worksite monitor shall not have a current or former financial, personal, or familial relationship with Respondent, or any other relationship that could reasonably be expected to compromise the ability of the monitor to render impartial and unbiased reports to the Board or its designee. If it is impractical for anyone but Respondent's employer to serve as the worksite monitor, this requirement may be waived by the Board or its designee, however, under no circumstances shall Respondent's worksite monitor be an employee or supervisee of the licensee.

The worksite monitor shall have an active unrestricted license with no disciplinary action within the last five (5) years, and shall sign an affirmation that he or she has reviewed the terms and conditions of Respondent's disciplinary order and agrees to monitor Respondent as set forth by the Board or its designee.

Respondent shall pay all worksite monitoring costs.

The worksite monitor shall have face-to-face contact with Respondent in the work environment on as frequent a basis as determined by the Board or its designee, but not less than once per week; interview other staff in the office regarding Respondent's behavior, if requested by the Board or its designee; and review Respondent's work attendance.

The worksite monitor shall verbally report any suspected substance abuse to the Board and Respondent's employer or supervisor within one (1) business day of occurrence. If the suspected substance abuse does not occur during the Board's normal business hours, the verbal report shall be made to the Board or its designee within one (1) hour of the next business day. A written report that includes the date, time, and location of the suspected abuse; Respondent's actions; and

any other information deemed important by the worksite monitor shall be submitted to the Board or its designee within 48 hours of the occurrence.

The worksite monitor shall complete and submit a written report monthly or as directed by the Board or its designee which shall include the following: (1) Respondent's name and Physician's and Surgeon's Certificate number; (2) the worksite monitor's name and signature; (3) the worksite monitor's license number, if applicable; (4) the location or location(s) of the worksite; (5) the dates Respondent had face-to-face contact with the worksite monitor; (6) the names of worksite staff interviewed, if applicable; (7) a report of Respondent's work attendance; (8) any change in Respondent's behavior and/or personal habits; and (9) any indicators that can lead to suspected substance abuse by Respondent. Respondent shall complete any required consent forms and execute agreements with the approved worksite monitor and the Board, or its designee, authorizing the Board, or its designee, and worksite monitor to exchange information.

If the worksite monitor resigns or is no longer available, Respondent shall, within five (5) calendar days of such resignation or unavailability, submit to the Board or its designee, for prior approval, the name and qualifications of a replacement monitor who will be assuming that responsibility within fifteen (15) calendar days. If Respondent fails to obtain approval of a replacement monitor within sixty (60) calendar days of the resignation or unavailability of the monitor, Respondent shall receive a notification from the Board or its designee to cease the practice of medicine within three (3) calendar days after being so notified. Respondent shall cease the practice of medicine until a replacement monitor is approved and assumes monitoring responsibility.

- 10. <u>VIOLATION OF PROBATION CONDITION FOR SUBSTANCE ABUSING</u>
 <u>LICENSEES</u>. Failure to fully comply with any term or condition of probation is a violation of probation.
- A. If Respondent commits a major violation of probation as defined by section 1361.52, subdivision (a), of Title 16 of the California Code of Regulations, the Board shall take one or more of the following actions:
 - (1) Issue an immediate cease-practice order and order Respondent to undergo a clinical

diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (c)(1), of Title 16 of the California Code of Regulations, at Respondent's expense. The cease-practice order issued by the Board or its designee shall state that Respondent must test negative for at least a month of continuous biological fluid testing before being allowed to resume practice. For purposes of determining the length of time a Respondent must test negative while undergoing continuous biological fluid testing following issuance of a cease-practice order, a month is defined as thirty (30) calendar days. Respondent may not resume the practice of medicine until notified in writing by the Board or its designee that he or she may do so.

- (2) Increase the frequency of biological fluid testing.
- (3) Refer Respondent for further disciplinary action, such as suspension, revocation, or other action as determined by the Board or its designee.
- B. If Respondent commits a minor violation of probation as defined by section 1361.52, subdivision (c), of Title 16 of the California Code of Regulations, the Board shall take one or more of the following actions:
 - (1) Issue a cease-practice order;
 - (2) Order practice limitations;
 - (3) Order or increase supervision of Respondent;
 - (4) Order increased documentation;
 - (5) Issue a citation and fine, or a warning letter;
- (6) Order Respondent to undergo a clinical diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (c)(1), of Title 16 of the California Code of Regulations, at Respondent's expense;
 - (7) Take any other action as determined by the Board or its designee.
- C. Nothing in this Decision shall be considered a limitation on the Board's authority to revoke Respondent's probation if he or she has violated any term or condition of probation. If Respondent violates probation in any respect, the Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed

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against Respondent during probation, the Board shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final.

11. <u>NOTIFICATION</u>. Within seven (7) days of the effective date of this Decision, Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the Chief Executive Officer at every hospital where privileges or membership are extended to Respondent, at any other facility where Respondent engages in the practice of medicine, including all physician and locum tenens registries or other similar agencies, and to the Chief Executive Officer at every insurance carrier which extends malpractice insurance coverage to Respondent. Respondent shall submit proof of compliance to the Board or its designee within fifteen (15) calendar days.

This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

- 12. <u>PATIENT DISCLOSURE.</u> Before a patient's first visit following the effective date of this order and while the Respondent is on probation, the Respondent must provide all patients, or patient's guardian or health care surrogate, with a separate disclosure that includes the Respondent's probation status, the length of the probation, the probation end date, all practice restrictions placed on the respondent by the board, the board's telephone number, and an explanation of how the patient can find further information on the respondent's probation on the Respondent's profile page on the board's website. Respondent shall obtain from the patient, or the patient's guardian or health care surrogate, a separate, signed copy of that disclosure. Respondent shall not be required to provide a disclosure if any of the following applies: (1) The patient is unconscious or otherwise unable to comprehend the disclosure and sign the copy of the disclosure and a guardian or health care surrogate is unavailable to comprehend the disclosure and sign the copy; (2) The visit occurs in an emergency room or an urgent care facility or the visit is unscheduled, including consultations in inpatient facilities; (3) Respondent is not known to the patient until immediately prior to the start of the visit; (4) Respondent does not have a direct treatment relationship with the patient.
- 13. <u>OBEY ALL LAWS</u>. Respondent shall obey all federal, state and local laws, all rules governing the practice of medicine in California and remain in full compliance with any court

Respondent shall immediately inform the Board or its designee, in writing, of travel to any areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty (30) calendar days.

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In the event Respondent should leave the State of California to reside or to practice, Respondent shall notify the Board or its designee in writing thirty (30) calendar days prior to the

dates of departure and return.

- 16. <u>INTERVIEW WITH THE BOARD OR ITS DESIGNEE</u>. Respondent shall be available in person upon request for interviews either at Respondent's place of business or at the probation unit office, with or without prior notice throughout the term of probation.
- 17. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or its designee in writing within fifteen (15) calendar days of any periods of non-practice lasting more than 30 calendar days and within fifteen (15) calendar days of Respondent's return to practice. Non-practice is defined as any period of time Respondent is not practicing medicine as defined in Business and Professions Code sections 2051 and 2052 for at least forty (40) hours in a calendar month in direct patient care, clinical activity or teaching, or other activity as approved by the Board. If Respondent resides in California and is considered to be in non-practice, Respondent shall comply with all terms and conditions of probation. All time spent in an intensive training program which has been approved by the Board or its designee shall not be considered non-practice and does not relieve Respondent from complying with all the terms and conditions of probation. Practicing medicine in another state of the United States or Federal jurisdiction while on probation with the medical licensing authority of that state or jurisdiction shall not be considered non-practice. A Board-ordered suspension of practice shall not be considered as a period of non-practice.

In the event Respondent's period of non-practice while on probation exceeds 18 calendar months, Respondent shall successfully complete the Federation of State Medical Boards' Special Purpose Examination, or, at the Board's discretion, a clinical competence assessment program that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

Respondent's period of non-practice while on probation shall not exceed two (2) years.

Periods of non-practice will not apply to the reduction of the probationary term.

Periods of non-practice for a Respondent residing outside of California will relieve Respondent of the responsibility to comply with the probationary terms and conditions with the exception of this condition and the following terms and conditions of probation: Obey All Laws;

General Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or Controlled Substances; and Biological Fluid Testing.

- 18. <u>COMPLETION OF PROBATION</u>. Respondent shall comply with all financial obligations (e.g., restitution, probation costs) not later than one hundred twenty (120) calendar days prior to the completion of probation. Upon successful completion of probation, Respondent's certificate shall be fully restored.
- 19. <u>VIOLATION OF PROBATION</u>. Failure to fully comply with any term or condition of probation is a violation of probation. If Respondent violates probation in any respect, the Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed against Respondent during probation, the Board shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final.
- 20. <u>LICENSE SURRENDER</u>. Following the effective date of this Decision, if
 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
 the terms and conditions of probation, Respondent may request to surrender his or her license.
 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in
 determining whether or not to grant the request, or to take any other action deemed appropriate
 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent
 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its
 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject
 to the terms and conditions of probation. If Respondent re-applies for a medical license, the
 application shall be treated as a petition for reinstatement of a revoked certificate.
- 21. <u>PROBATION MONITORING COSTS</u>. Respondent shall pay the costs associated with probation monitoring each and every year of probation, as designated by the Board, which may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of California and delivered to the Board or its designee no later than January 31 of each calendar year.

1	ACCEPTANCE			
2	I have carefully read the above Stipulated Settlement and Disciplinary Order and have full			
3	discussed it with my attorney, Adam G. Slote. I understand the stipulation and the effect it will			
4	have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and			
5	Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the			
6	Decision and Order of the Medical Board of California.			
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8	DATED: 07/08/19	_		
9	MARGARET L. SALMON, M.D. Respondent			
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1	I have read and fully discussed with Respondent Margaret L. Salmon, M.D. the terms and	İ		
2	conditions and other matters contained in the above Stipulated Settlement and Disciplinary Ord	eı		
3	I approve its form and content.			
4				
.	DATED: July 9, 2019			
16	ADAM G. SLOTE Attorney for Respondent			
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22	<i>III</i>			
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ENDORSEMENT

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Medical Board of California.

DATED: July 9, 2019

Respectfully submitted,

XAVIER BECERRA Attorney General of California MARY CAIN-SIMON Supervising Deputy Attorney General

GREG W. CHAMBERS
Deputy Attorney General
Attorneys for Complainant

Exhibit A

Accusation No. 800-2018-043687

1	XAVIER BECERRA Attorney General of California	
2	MARY CAIN-SIMON Supervising Deputy Attorney General	
3	GREG W. CHAMBERS	FILED STATE OF CALIFORNIA
4	Deputy Attorney General State Bar No. 237509	MEDICAL ROARD OF CALIFORNIA
5	455 Golden Gate Avenue, Suite 11000 San Francisco, CA 94102-7004	SACRAMENTO MAY 29 20 19 BY TOWN THE ANALYST
6	Telephone: (415) 510-3382 Facsimile: (415) 703-5480	ANALYSI
7	Attorneys for Complainant	•
8	BEFOR	E THE
9	MEDICAL BOARD OF CALIFORNIA	
10	DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA	
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13	In the Matter of the Accusation Against:	Case No. 800-2018-043687
14	Margaret L. Salmon, M.D. 2753 23rd Street	ACCUSATION
15	San Francisco, CA 94110-3443	
16	Physician's and Surgeon's Certificate No. A 112137,	
17	Respondent.	
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19	Complainant álleges:	
20	PART	<u>TIES</u>
21	Kimberly Kirchmeyer (Complainant)	brings this Accusation solely in her official
22	capacity as the Executive Director of the Medical Board of California, Department of Consumer	
23	Affairs (Board).	
24	2. On or about April 28, 2010, the Medic	cal Board issued Physician's and Surgeon's
25	Certificate Number A 112137 to Margaret L. Salmon, M.D. (Respondent). The Physician's and	
26	Surgeon's Certificate was in full force and effect at all times relevant to the charges brought	
27	herein and will expire on September 30, 2019, unl	ess renewed.
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JURISDICTION

- 3. This Accusation is brought before the Board, under the authority of the following laws. All section references are to the Business and Professions Code unless otherwise indicated.
- 4. Section 2227 of the Business and Professions Code authorizes the Board to take action against a licensee by revoking, suspending for a period not to exceed one year, placing the license on probation and requiring payment of costs of probation monitoring, or taking such other action taken as the Board deems proper.
 - 5. Section 2239 of the Code states in pertinent part:
- "(a) The use or prescribing for or administering to himself or herself, of any controlled substance; or the use of any of the dangerous drugs specified in Section 4022, or of alcoholic beverages, to the extent, or in such a manner as to be dangerous or injurious to the licensee, or to any other person or to the public, or to the extent that such use impairs the ability of the licensee to practice medicine safely or more than one misdemeanor or any felony involving the use, consumption, or self-administration of any of the substances referred to in this section, or any combination thereof, constitutes unprofessional conduct. The record of the conviction is conclusive evidence of such unprofessional conduct."
- 6. Section 820 of the Code provides that whenever it appears that a licensee may be unable to practice his or her profession safely as a result of mental illness or physical illness affecting competency, the licensing agency may order an examination of licensee.
- 7. Section 822 of the Code provides that, if a licensing agency determines that a licensee's ability to practice his or her profession safely is impaired because of mental or physical illness affecting competency, the licensing agency may take action by revoking the licensee's certificate or license, suspending the licensee's right to practice, placing the licensee on probation, or taking such other action in relation to the licensee as the licensing agency in its discretion deems proper.

FACTS

8. On April 5, 2018, Firefighter-Engineer D.S., a 22-year veteran of the Mendocino County Fire District, responded to a call involving an unconscious patient who had overdosed. At

the patient's residence, D.S. counted nine (9) pills in the patient's alprazolam¹ bottle and, subsequent to arriving at the hospital, handed the pill bottle to the ER charge nurse, K.M., R.N.

- 9. On April 5, 2018, nurse K.M. received a pill bottle from Firefighter-Engineer D.S. and conducted a pill count, confirming nine (9) pills in the bottle. Dr. Salmon grabbed the bottle out of nurse K.M.'s hand and left the patient treatment area. Nurse K.M. could not find Dr. Salmon and when she eventually did find her, nurse K.M. asked for and received the pill bottle back. Nurse K.M. then noted that only eight (8) pills were in the bottle and reported the incident to hospital administrative staff.
- 10. Because of the pill count discrepancy, Dr. Salmon was asked to provide a urine toxicology screen, which subsequently returned positive for the following substances: alcohol metabolites; tramadol²; alprazolam; clonazepam³; codeine⁴; morphine⁵; hydrocodone⁶; norhydrocodone; and norcodeine.
- 11. Dr. Salmon claims that she took an alprazolam pill while waiting to take the urine toxicology test on April 5, 2018, because she was having a "panic attack."
- 12. Dr. Salmon does not have a current prescription for alprazolam and claims that she received the alprazolam from a treating physician in Africa.

² Tramadol, known the trade name, Ultram, is a centrally acting synthetic analgesic compound. It is a dangerous drug as defined in section 4022 of the Business and Professions Code, and a schedule II controlled substance as defined by section 11057 of the Health and Safety Code. Tramadol is indicated for the management of moderate to moderately severe pain.

³ Clonazepam is a benzodiazepine, a central nervous system (CNS) depressant. Some benzodiazepines are used to relieve anxiety. However, benzodiazepines should not be used to relieve nervousness or tension caused by the stress of everyday life. Some benzodiazepines are used to treat insomnia. However, if used regularly for insomnia, they usually are not effective for more than a few weeks.

⁴ Codeine is a narcotic analgesic and CNS depressant. Codeine is known to be subject to abuse and must be administered only under close supervision to patients with a history of drug abuse or dependence.

S Morphine sulfate is for use in patients who require a potent opioid analgesic for relief of moderate to severe pain. Morphine is a dangerous drug as defined in section 4022, a schedule II controlled substance and narcotic as defined by section 11055, subdivision (b)(1) of the Health and Safety Code.

⁶ Hydrocodone is a dangerous drug as defined in section 4022 and a Schedule III controlled substance and narcotic as defined by section 11056 of the Health and Safety Code.

¹ Alprazolam, known by the trade name Xanax, is a psychotropic triazolo analogue of the 1,4 benzodiazepine class of central nervous system-active compounds. Xanax is used for the management of anxiety disorders or for the short-term relief of the symptoms of anxiety. It is a dangerous drug as defined in section 4022 and a schedule IV controlled substance and narcotic as defined by section 11057, subdivision (d) of the Health and Safety Code.

- 13. On November 16, 2018, the Board entered an Order Compelling Psychiatric Evaluation of Licensee ordering Respondent to submit to an examination to be conducted by a physician and surgeon specializing in psychiatry to be selected by the Board or its designee to determine if Respondent were mentally ill to such an extent as to affect her ability to practice medicine.
- 14. On December 12, 2018, Respondent underwent a full evaluation by a Board appointed psychiatrist.
- 15. In a report to the Board dated February 14, 2019, the psychiatrist concluded that Dr. Salmon has a Circadian Rhythm Sleep-Wake disorder, and an Anxiolytic Use Disorder relating to medication for anxiety. The psychiatrist opined "that Dr. Salmon is *not* able to practice medicine safely at this time without certain restrictions or conditions. In other words, she *does require* certain restrictions or conditions to practice medicine safely." (Emphasis original.) The psychiatrist concluded that without the imposition of certain restrictions or conditions to Dr. Salmon's physician's and surgeon's certificate, Dr. Salmon presents a risk to patient safety.

CAUSE FOR DISCIPLINE

(Mental Impairment)

16. Respondent's certificate is subject to Board action pursuant to Sections 822, 2227, and 2239 of the Code, in that due to a mental illness and her controlled substance use, her ability to practice medicine safely is impaired.

PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Medical Board of California issue a decision:

- 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 112137, issued to Margaret L. Salmon, M.D.;
- 2. Revoking, suspending or denying approval of Margaret L. Salmon, M.D.'s authority to supervise physician assistants and advanced practice nurses;
- 3. Ordering Margaret L. Salmon, M.D., if placed on probation, to pay the Board the costs of probation monitoring; and

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1	4. Taking such other and further action as deemed necessary and proper.		
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3	DATED: May 29, 2019		
4	KIMBERLVKIRCHMEY世代 Executive Director		
5	Medical Board of California Department of Consumer Affairs		
6	KIMBERLY KIRCHMEYHR Executive Director Medical Board of California Department of Consumer Affairs State of California Complainant		
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